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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/065,527			ing Date 25/2 <b>00</b> 2	☐ To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL ENTITY			HER THAN ALL ENTITY
FOR			IUMBER FI	.ED NU	MBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A		ı	N/A	
	SEARCH FEE (37 CFR 1 16(k), (i),	or (m))	N/A		N/A	1	N/A		ı	N/A	
	EXAMINATION FE (37 CFR 1,16(o), (p),		N/A		N/A		N/A		l	N/A	
TO' (37	TAL CLAIMS CFR 1.16(i))		mir	us 20 = *		l	x s = 1		OR	x s =	
IND (37	EPENDENT CLAIM CFR 1.16(h))	IS	minus 3 = *			l	X \$ = 1			X \$ =	
APPLICATION SIZE FEE (37 CFR 1.16(a))  APPLICATION SIZE FEE (35 CFR 1.16(a))  APPLICATION SIZE FEE (37 CFR 1.16(a))					n size fee due for each n thereof. See						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))									ı		
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL			TOTAL	L
APPLICATION AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY											
AMENDMENT	04/27/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (S)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	- 20	Minus	·· 20	= 0	ı	X \$ =		OR	X \$52=	0
	Independent (37 CFR 1.16(h))	• 2	Minus	3	= 0	ı	X \$ =		OR	X \$220=	0
	Application Size Fee (37 CFR 1.16(s))								_		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))					П			OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16(i))		Minus		=		X \$ =		OR	x s =	
M	Independent (37 CFR 1 16(h))		Minus	***	-	l	X \$ =		OR	x s =	
Į.	Application Size Fee (37 CFR 1.16(s))								l		
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
TOI ADI FEE									OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "O' in column 3.  *If the "Highest Number Previously Paid For' IN THIS SPACE is less than 2, enter "20".  *If the "Highest Number Previously Paid For' IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For' (Total or independent) is the highest number found in the appropriate box in column 1.  *The Thighest Number Previously Paid For' (Total or independent) is the highest number found in the appropriate box in column 1.  *The Thighest Number Previously Paid For' (Total or independent) is the highest number found in the appropriate box in column 1.  *The Thighest Number Previously Paid For' (Total or independent) is the highest number found in the appropriate box in column 1.											

This collection of information is required by 37 GPR 11.6. The information is required to obtain or retain a benefit by the public at Printing to 16 (and by the 1921 A) process) an application Confidentially 37 GPR 11.6. This information is required to obtain or retain a benefit by the public at Printing to 16 (and by the 1921 A) process) and public of the completed application from the turb (S. 12 and 37 GPR). The well way depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suppleation for medical pictured in the public pictured i